

01-25-02

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**UTILITY PATENT
APPLICATION
TRANSMITTAL**

*(Only for nonprovisional
applications under 37 CFR 1.53(b))*

997 U.S. PTO
10/055475
01/22/02
PATENT

Attorney Docket No. A34614-A-PCT-USA-A (070050.1921)

First Named Inventor Paul B. Fisher

Customer No. 21003

Total Pages: 81

BY EXPRESS MAIL – Label No. EF377398998US

January 22, 2002

Box: Patent Application

U.S. Patent and Trademark Office
P.O. Box 2327
Arlington, Virginia 22202

Sir:

Enclosed herewith for filing is a patent application of Paul B. Fisher entitled "USE OF MDA-5
AS AN ANTIVIRAL AND ANTIPROLIFERATIVE AGENT" which includes:

☒ Specification 75 Total Pages
☒ Background of the Invention; Summary
of the Invention; Brief Description of
the Figures; Detailed Description of the
Invention; Experiments and Examples 46 pages
☒ Claims 10 pages
☒ Abstract 1 page
☒ Drawings 15 sheets
☐ formal
☒ informal Figs. 1-12
☒ Combined Declaration and Power of Attorney 3 pages (unexecuted)
☐ Newly executed (original or copy)
☐ Copy from a prior application Serial No. _____

☒ If a continuing application, check appropriate box:

☐ Continuation ☐ Divisional ☒ Continuation-In-Part

of prior International Application Serial No. PCT/US01/06960, filed February 28, 2001, which is
a continuation-in-part of U.S. Patent Application No. 09/515,363, filed February 29, 2000.

☐ Amend the specification by inserting, before the first line, the following sentence:

NY02:366765.1

The PTO did not receive the following
listed item(s) check for \$1450.00
PTO received check for \$1090.00

"This is a ☐ continuation ☐ divisional ☐ continuation-in-part of prior application Serial No. _____, filed _____, which is a divisional application of International Patent Application _____, filed _____, which is a continuation-in-part of U.S. Patent Application No. _____, filed _____, now U.S. Patent No. _____."

[X] The entire disclosures of the prior applications are considered as being part of the disclosure of the accompanying application and are hereby incorporated by reference therein.

[X] An Assignment of the invention to The Trustees of Columbia University in the City of New York ☐ is attached. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.

[X] will follow.

☐ has been filed in prior application Serial No. ____ and recorded at Reel ____ Frames ____ on ____.

[X] Small Entity Statement(s)

☐ is/are attached.

☐ Small Entity Statement filed in prior application. Status still proper and desired.

☒ will follow.

☐ Information Disclosure Statement

__ pages

☐ PTO Form 1449.

__ pages

☐ Copy of newly cited IDS Citation is enclosed.

__ pages

☐ Copies of previously considered IDS Citations are not required.

Also accompanying this patent application are:

☐ Application Data Sheet

☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

☐ Nucleotide and/or Amino Acid Sequence Submission

☐ Preliminary Amendment

__ pages

☐ Non-Publication Request

[X] Return Receipt Postcard

☐ Other: Sequence Listing/Declaration

__ pages

[X] The filing fee has been calculated as shown below:

FOR	(Col. 1) No. Filed	(Col. 2) No. Extra	Small Entity Rate	Fee	OR	Other Than A Small Entity Rate	Fee
Basic Fee				\$370.00			\$0.00
Total Claims	98	-20 = 78	x 9 =	\$702.00	x 18 =		\$0.00
Ind. Claims	12	-3 = 9	x 42 =	\$378.00	x 84 =		\$0.00
Multiple Dependent Claim			+ 140 =	\$0.00	+ 280 =		\$0.00
			Total	\$1450.00			\$0.00

* If the difference in Col. 1 is less than zero, enter "0" in Col. 2.

Fee Payment:

☒ Enclosed

<input checked="" type="checkbox"/>	Basic filing fee	\$1450.00
<input type="checkbox"/>	Recording Assignment [\$40.00; 37 CFR 1.21(h)]	\$0.00
Total Fees Enclosed		\$1450.00

☒ A check in the amount of \$1450.00 to cover filing fee is enclosed.☐ Please charge our Deposit Account No. 02.4377 in the amount of _____. Two copies of this sheet are enclosed.

Foreign Priority:

☐ Priority is claimed of application Serial No. _____ filed _____.☐ Submission of Priority Document Certified Copy of priority document(s) of Appln No. _____, filed _____.☐ has been filed in the parent application S/N _____.☐ is/are attached.☐ will follow.☒ The Commissioner is hereby authorized to charge payment of any additional filing fees required under 37 CFR §§ 1.16, 1.17, and 1.21(h) associated with this communication or credit any overpayment to Deposit Account No. 02-4377. Two copies of this sheet are enclosed.☒ The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication or credit any overpayment to Deposit Account No. 02-4377. Two copies of this sheet are enclosed.☒ The Commissioner is conditionally authorized to charge payment of any fees associated with this application or credit any overpayment to Deposit Account No. 02-4377. Two copies of this sheet are enclosed.

Respectfully submitted,

BAKER BOTTS LLP.

Lisa B. Kole, M.D., Ph.D.
Patent Office Reg. No. 35,225Attorney for Applicants
(212) 408-2628

Enclosures

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 1,450

Complete if Known

Application Number	Not Yet Assigned
Filing Date	January 22, 2002
First Named Inventor	Fisher
Examiner Name	Not Yet Assigned
Group Art Unit	Not Yet Assigned
Attorney Docket No.	A34614-A-PCT-USA-A

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **02-4377**
Deposit Account Name **Baker Botts LLP**

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
☒ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
740	370	Utility filing fee	370
330	165	Design filing fee	
510	255	Plant filing fee	
740	370	Reissue filing fee	
160	80	Provisional filing fee	

SUBTOTAL (1) (\$ 370

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
98	20 ** = 78	9	702
Independent Claims	12 - 3 ** = 9	42	378
Multiple Dependent			

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description
18	9	Claims in excess of 20
84	42	Independent claims in excess of 3
280	140	Multiple dependent claim, if not paid
84	42	** Reissue independent claims over original patent
18	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 1,080

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	For filing a request for ex parte reexamination	
920*	920*	Requesting publication of SIR prior to Examiner action	
1,840*	1,840*	Requesting publication of SIR after Examiner action	
110	55	Extension for reply within first month	
400	200	Extension for reply within second month	
920	460	Extension for reply within third month	
1,440	720	Extension for reply within fourth month	
1,960	980	Extension for reply within fifth month	
320	160	Notice of Appeal	
320	160	Filing a brief in support of an appeal	
280	140	Request for oral hearing	
1,510	1,510	Petition to institute a public use proceeding	
110	55	Petition to revive - unavoidable	
1,280	640	Petition to revive - unintentional	
1,280	640	Utility issue fee (or reissue)	
460	230	Design issue fee	
620	310	Plant issue fee	
130	130	Petitions to the Commissioner	
50	50	Processing fee under 37 CFR 1.17(q)	
180	180	Submission of Information Disclosure Stmt	
40	40	Recording each patent assignment per property (times number of properties)	
740	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
740	370	For each additional invention to be examined (37 CFR § 1.129(b))	
740	370	Request for Continued Examination (RCE)	
900	900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 0

SUBMITTED BY

Name (Print/Type)

Lisa B. Kole

Registration No. (Attorney/Agent)

35,225

Complete (if applicable)

Telephone

(212) 408-2628


Signature

Lisa B. Kole

Date

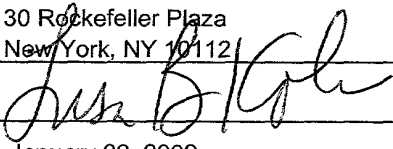
January 22, 2002

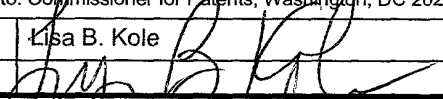
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Please type a plus sign (+) inside this box → 

<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>	Application Number	Not Yet Assigned
	Filing Date	January 22, 2002
	First Named Inventor	Fisher
	Group Art Unit	Not Yet Assigned
	Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission		Attorney Docket Number A34614-A-PCT-USA-A

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks <input type="checkbox"/>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name BakerBotts LLP 30 Rockefeller Plaza New York, NY 10112	Att Name: Lisa B. Kole PTO Reg: 35,225
Signature 	
Date January 22, 2002	

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: <u>January 22, 2002</u>	
Typed or printed name Lisa B. Kole	
Signature 	Date January 22, 2002